

SO Payment Details

Payment Mode : Bank Transfer
Beneficiary Name : Anthirs Protasis
Beneficiary Bank Name : HELLENIC BANK PUBLIC COMPANY LTD
Beneficiary IBAN : CY200050031400031401A6310901
Date/Time : 2020/12/25 03:46
Reference Number : SO - 910620
Number Of Transactions : 2
Commission Value: 10.00%
Rate: 0.60%

Date	Branch	Time	Merchant User Type	Merchant User	TranID	Amount (€)	Tips (€)	Commission	Fee	Net Amount
2020/12/24	LEOF GRIVA DIGENI 47	12:41	SuperAdmin	Admin	1682130	25.00	0.00	2.50	0.14	22.36
		14:36	SuperAdmin	Admin	1683607	16.00	0.00	1.60	0.09	14.31
		Total/Branch				41.00	0.00	4.10	0.23	36.67
	Total/Date					41.00	0.00	4.10	0.23	36.67
Total						41.00	0.00	4.10	0.23	36.67